Image# 11930384467 02/15/2011 12:59

# FEC FORM 9 24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

=						
1.	1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations					
	(a) Name Americans For Common Sense Solutions					
-		T				
_	(b) Address (number and street) check if differe 170 Westminster Street	2. FEC Identification Number				
_	(c) City, State and ZIP Code Providence	C C30001903				
	(d) Name of Employer or Principal Place of Business	(e) Occup	ation			
	n/a	n/a				
3.	Is This Statement or Amended	4. Covering Period	through			
5.	(a) Date of Public Distribution(s)	21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	unication Title Constitution			
6.	The filer is a(n): (a) Individual (b) X	Unincorporated Organization (c) Q	ualified Nonprofit Corporation (11 CFR 114.10)			
	(d) Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15  (e) Other, specify:					
7.	Were the disbursements for the electione from donations to a segregated bank acceptable.	_	sively Yes No No			
8. Custodian of Records (a) Name						
					Christopher Stenberg	
	(b) Address (number and street) 170 Westminster Street					
	(c) City, State and ZIP Code					
	Providence	RI	02903			
	(d) Name of Employer or Principal Place of Business	(e) Occup	pation			
	self-employed	consulta	nt			
9. Total Donations This Statement 50000.00						
10	D.Total Disbursements/Obligations This Sta	tement	38988.63			
	Under penalty of perjury, I certify that this statement is tru	e, correct and complete.				
	TYPE OR PRINT NAME OF PERSON COMPLETING F	ORM Christopher Stenberg				
	SIGNATURE _Electronically Filed by Christophe	r Stenberg DATE _	02/15/2011			

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalities of 2 U.S.C. 437g.

## List of Person(s) Sharing/Exercising Control (use additional pages as necessary)

PAGE 2/6

A.	(a) Name		Transction ID:	F91.000001
	Christopher Stenberg			
	(b) Address (number and street) 170 Westminster Street			
	(c) City, State and Zip Code			
	Providence	RI	02903	
	(d) Name of Employer or Principal Place of Business		(e) Occupation	
	self-employed		consultant	
В.	(a) Name		Transction ID :	F91.000002
	Edward Cotugno			
	(b) Address (number and street) 1692 Chalkstone Ave.			
	(c) City, State and Zip Code			
	Providence	RI	02909	
	(d) Name of Employer or Principal Place of Business		(e) Occupation	

<b>A.</b> F	Full Name of Donor			Date of Receipt	
J	ennifer Johnson			$\begin{bmatrix} M & M \\ 1 & 0 \end{bmatrix} / \begin{bmatrix} D & D \\ 2 & 0 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$	
<u> </u>	Mailing Address of Donor 4319 Oakwood Avenue			Amount	
4					
-	City	State	Zip	50000.00	
	_a Canada	CA	91011	<b>Transction ID:</b> F92.000001	
-				114113611011112. 1 32.000001	
SUBTOT	<b>AL</b> of Donations This Page (optional)			50000.00	
	his Period (last page this line number ocarry total from last page to Line 9)	nly)		50000.00	

### Disbursement(s) Made or Obligations

A.	(-ac, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,			Date of Disbursement or Obligation	
_	Seaside Communications			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	
	Mailing Address of Payee				
l _	125 N. Nopal Street			Amount	
	City	State Zip C	ode	24945.00	
	Santa Barbara	CA 93103		Communication Date	
-	Name of Employer	Occupati	on	1.0	
	n/a	n/a		Transction ID: F93.000001	
-	Purpose of Disbursement (including	title(s) of communication(s))		1141130131112 1   93.000001	
	TV/media placement - Constitution				
	Name of Federal Candidate	Office Sought: X House	State: CA	Disbursement/Obligation For: 2010	
	Lois Capps	Senate	District: 23	Primary X General	
	F94.000003	Presider		Other (specify)	
	Name of Federal Candidate	Office Sought: House	State:	Disbursement/Obligation For:	
		Senate		Primary General	
		Presider	District:	Other (specify)	
-	Name of Federal Candidate	Office Sought: House	Chahai	Disbursement/Obligation For:	
		Senate	State:	Primary General	
		Presiden	t District:	Other (specify)	
В.	(,,	of Payee		Date of Disbursement or Obligation	
-	Seaside Communications			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	
	Mailing Address of Payee			Amount	
_	125 N. Nopal Street				
	City State Zip Code			745.00	
l _	Santa Barbara	CA 9310	Communication Date		
	Name of Employer	Occupation	on	1 0 2 1 2 0 1 0	
	n/a n/a			Transction ID: F93.000002	
_	Purpose of Disbursement (including	title(s) of communication(s))			
	TV/media placement - Constitution				
-	Name of Federal Candidate	Office Sought: X House	State: CA	Disbursement/Obligation For: 2010	
	Lois Capps	House Senate	Oldio.	Primary X General	
	F94.000004	Presider	District: 23	Other (specify)	
-	Name of Federal Candidate	Office Sought: House		Disbursement/Obligation For:	
		Senate	State:	Primary General	
		Presider	District:	Other (specify)	
-	Name of Federal Candidate			Disbursement/Obligation For:	
	Name of Federal Candidate	Office Sought: House Senate	State:	Primary General	
		Presiden	t District:		
			•	Other (specify)	
		05000.00			
	SUBTOTAL of Disbursement/Obligation This Page (optional)			25690.00	
	TOTAL This Period (last page this				
	(carry total from last page to	ine 10)			

#### Disbursement(s) Made or Obligations

<b>A.</b> -	Full Name (Last, First, Middle Initial) Seaside Communications  Mailing Address of Payee 125 N. Nopal Street  City Santa Barbara  Name of Employer n/a	Date of Disbursement or Obligation  M M / D D / Y Y Y Y Y 2 0 1 0  Amount  7000.00  Communication Date  M M / D D / Y Y Y Y Y 1.0  Transction ID: F93.000003	
	Purpose of Disbursement (including	title(s) of communication(s))	
_	TV/media placement - Constitution  Name of Federal Candidate Lois Capps	Office Sought: X House State: CA Senate District: 23 President	Disbursement/Obligation For: 2010 Primary X General Other (specify)
	F94.000006  Name of Federal Candidate	Office Sought: House State: Senate District:	Disbursement/Obligation For: Primary General Other (specify)
	Name of Federal Candidate	Office Sought: House State: Senate President District:	Disbursement/Obligation For: Primary General Other (specify)
<b>B</b> .	Full Name (Last, First, Middle Initial) Walsh & Associates, Inc. Mailing Address of Payee	Date of Disbursement or Obligation  M M J D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	294 Main Street	Amount	
-	City East Greenwich Name of Employer	State Zip Code RI 02818 Occupation	Communication Date
	n/a	n/a	1.0 2.1 2.01.0
-	Purpose of Disbursement (including TV/media productionn - Constitution	title(s) of communication(s))	Transction ID: F93.000004
	Name of Federal Candidate Lois Capps	Office Sought: X House State: CA Senate District: 23 President	Disbursement/Obligation For: 2010 Primary X General Other (specify)
_	F94.000008  Name of Federal Candidate	Office Sought: House State: Senate President District:	Disbursement/Obligation For: Primary General Other (specify)
	Name of Federal Candidate	Office Sought: House State: Senate President District:	Disbursement/Obligation For: Primary General Other (specify)
	<del>-</del>	ation This Page (optional)line number only)b line 10)	8887.21

### Disbursement(s) Made or Obligations

A.				Date of Disbursement or Obligation		
_	Walsh & Associates, Inc.			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		
	Mailing Address of Payee			Amount		
l _	294 Main Street					
	City East Greenwich	State Zip Code		2205.54		
l _		RI 02818		Communication Date		
	Name of Employer	Occupation		1 0 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
l _		n/a n/a  Purpose of Disbursement (including title(s) of communication(s))		Transction ID: F93.000005		
	Purpose of Disbursement (including tit					
l _	TV/media production - Constitution					
	Name of Federal Candidate	Office Sought: X House	State: CA	Disbursement/Obligation For: 2010		
	Lois Capps	Senate	District: 23	Primary X General		
l _	F94.000010	Presiden		Other (specify)		
	Name of Federal Candidate	Office Sought: House	State:	Disbursement/Obligation For:		
		Senate	District:	Primary General		
l –		Presiden	t	Other (specify)		
	Name of Federal Candidate	Office Sought: House	State:	Disbursement/Obligation For:		
		Senate President	District:	Primary General		
		i resident		Other (specify)		
B.	Full Name (Last, First, Middle Initial) of Payee			Date of Disbursement or Obligation		
_	Teresa M. Graham			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		
	Mailing Address of Payee					
l _	27 Shangri-La Blvd			Amount		
	City State Zip Code			2205.88		
l_	East Wareham	MA 02538		Communication Date		
	Name of Employer n/a	Occupatio	10 21 YYYY 10 21 2010			
l_	//a media consultant			Transction ID: F93.00006		
	Purpose of Disbursement (including title(s) of communication(s))					
_	Media placement fee - Constitution					
	Name of Federal Candidate	Office Sought: X House	State: CA	Disbursement/Obligation For: 2010		
	Lois Capps	Senate	District: 23	Primary X General		
۱_	F94.000012	Presiden	t	Other (specify)		
	Name of Federal Candidate	Office Sought: House	State:	Disbursement/Obligation For:		
		Senate	District:	Primary General		
l_		Presiden	t	Other (specify)		
	Name of Federal Candidate	Office Sought: House	State:	Disbursement/Obligation For:		
		Senate President	District:	Primary General		
		Fresideiii	Biotifoti	Other (specify)		
				4411.40		
	SUBTOTAL of Disbursement/Obligation This Page (optional)			4411.42		
				20000 00		
	<b>TOTAL</b> This Period (last page this lin (carry total from last page to li	• • • • • • • • • • • • • • • • • • • •	L	38988.63		
	(Jan.) Lotal Holli labe page to li	/				